COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (includes Reference to PCT International Applications)

ATTORNEY'S DOCKET NUMBER

PHNL021164 US

As a below named inventor,	I hereby declare that:						
My residence, post office ad	dress and citizenship are as state	ed next to my name.					
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: "Method of manufacturing a curved display" the specification of which (check only one item below):							
is attached hereto.							
was filed as United States	s application						
Serial No							
on							
and was amended							
on	<u> </u>						
☑ was filed as PCT internat	ional application						
PCT/IB2003/00488							
Number 29 October 2003							
on 25 october 2005							
and was amended under PC	CT Article 19						
on			(if applicable).				
I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.							
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).							
I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:							
PRIOR FOREIGN/PCT APP	LICATION(S) AND ANY PRIOR	TY CLAIMS UNDER 35 U.S.C. 11	19:				
COUNTRY	APPLICATION NUMBER	DATE OF FILING DAY, MONTH, YEAR	PRIORITY CLAIMED UNDER 35 USC 119				
Europe	02079945.8	22 November 2002	YES				
		DEDARTMENT OF COMMERCE PA	tant and Tradamarka Office				

Combined Declaration For Patent Application and Power of Attorney (Continued) (includes Reference to PCT International Applications)

Attorneys Docket Number PHNL021164 US

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Jack E. Haken, Reg. No. 26,902 Michael E. Marion, Reg. No. 32, 266 Edward M. Blocker, Reg. No. 30,245 Direct Telephone Calls to: (name and telephone number) (914)332-0222

ì					
201	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
	INVENTOR	SLIKKERVEER	Peter	Jan	
	RESIDENCE &	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	CITIZENSHIP	Eindhoven The Netherlands		The Netherlands	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
		Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands	
	FULL NAME OF	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
	INVENTOR	BOUTEN	Petrus	Cornelis Paulus	
202	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
		Eindhoven	The Netherlands	The Netherlands	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
		Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands	
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
203		CIRKEL	Peter	Albert	
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
		Eindhoven	The Netherlands	The Netherlands	
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY	
		Prof. Holstlaan 6	5656 AA Eindhoven	The Netherlands	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 if Title 18 of the United states Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201

DATE: 24 June 2004

SIGNATURE OF INVENTOR 202

SIGNATURE OF INVENTOR 203

DATE 24 June 2004

DATE

24 June 2004

U.S. DEPARTMENT OF COMMERCE- Patent and Trademarks Office

(July 1994)

PTO/SB/80 (11-04)
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POWER OF ATTORNEY TO PROSECUTE APPLICATIONS BEFORE THE USPTO

I hereby revoke all previous powers of attorney (37 CFR 3.73(b).	given in the applic	ation identified l	n the attached st	atement under				
I hereby appoint:								
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Practitioner(s) named below (if more than ten patent p	ractitioners are to be	named, then a custo	mer number must be	used):				
Name	Registration Name		ime	Registration Number				
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<u> </u>								
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).								
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Assignee Name and Address:								
KONINKLIJKE PHILIPS ELECTRONICS N.V. Groenewoudseweg l 5621 BA Eindhoven, The Netherlands								
A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/8B/98 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of								
the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.								
SIGNATURE of Assignee of Record The individual whose signature and title is supplied below is authorized to act on behalf of the assignee								
Signature / //////////////////////////////////	wor	D	ate 02 FEB	2005				
Name Michael E. Marion		Te	elephone (914)					
Title Authorized Representative This collection of information is required by 37 CFR 1.31 1.32 and 1.33. The information is contributed by the multiple which is to find found.								

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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